STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

RECEIVED

PLEASE PRINT

A:: 13 2017

I. Name of Lobbyist(s) Leslie Wood		NE DEPAR	NEW MAN RED DEPARTMENT OF STATE	
II. Name of lobbyist's partnership, firm on N/A	or corporation, if any:	A	TIMENT OF STATE	
(Name of partnership, firm of	or corporation)	The state of the s		
950 F Street, NW, Suite 300	Washington	DC	20004	
Business Address: (Street)	(Town/City)	(State)	(Zip Code)	
(202) <u>835-3451</u> (202) (202)	02) 715-6987 (Fax)	e-mail_lwood@phrma.	org	
III. This statement covers: (Choose one - reportable expense transactions which are			file a separate report fo	
■ All reportable transactions occurring in	the months prior to the	reporting date relative to the f	following client:	
Pharmaceutical Research and M	lanufacturers of A	merica (PhRMA)		
	as it appears on the Lobby	ist Registration Form)		
OR ☐ All reportable transactions by the lobbyi unrelated to any particular client.	ist (including the lobbyi	st's family), or the lobbying fi	rm listed below which a	
IV. Date of Report April 26, 2017 M Reports cover: activity from date of registre		July 26, 2017 activity from 4/1/17 to 6/30/17		
October 25, 2017 activity from 7/1/17 to		January 31, 2018 [] activity from 10/1/17 to 12/31/17	,	
V. There have been no fees received a lf this box is checked, complete just this for Concord, NH 03301.				
VI. Check if additional reports are attack If you have received fees or made expe		Addendum A– Fees and Expe	enses	
☐ If you have paid an honorarium or reim Expense Reimbursement				
☐ If you, your firm, or your family has m	ade political contribution	ns, you must file Addendum	C- Political Contributio	
Sworn Statement/Affirmation by Lobbyi I have read RSA 15, RSA 15-B, RSA 14-C and complete to the best of my knowledge a Signature of lobbyist)	and RSA 664 and herel	by swear or affirm that the for $\frac{41211}{\text{(Date)}}$		
Leslie Wood				
(Print Name of Jobbyist)				

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>0.00</u>
f) Total of all expenses year to date	f) \$ <u>1,084.62</u>
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	lobbying fees during this reporting
Paid to:	Amount:
N/A	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir	m that the foregoing information
is true and complete to the best of my knowledge and belief.	11/12/12
(Signature of lobbyist)	(Date)
Leslie Wood	,
(Print Name of lobbyist)	

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Leslie Wood				
II. Name of lobbyist's partnership, firm or corporation, if any:				
N/A				
(Name of partnership, firm or corporation)				
III. Name of Client Pharmaceutical Research and Manufacturers of America (PhRMa	A) Date 4/10/2017			
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations service			
a) Total of all fees received in this reporting period	a) \$ _1,472.10			
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).	b) \$ <u>0.00</u> ear)			
c) Total of all fees received to date (Add lines a and b)	c) \$ _1,472.10			
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>0.00</u>			
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm aggregate total of all expenses paid penses; (b) the aggregate total of all expenses; than \$10 that is given to the person of with a value of \$25.00 or less); and the of greater than \$25.00 for the of greater than \$25, purchase of expense reimbursement, or political			
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported	a) \$ _1,084.62			
in a), of \$25 or less.	b) \$ <u>0.00</u>			
c) Total of all itemized expenditures reported in detail in section VI	c) \$ 0.00			

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist

Statement of Incom	e and Expenses for:	,	
Name of Lobbying par	rtnership, firm, or corpo	ration: Leslie Wood	
Name of Client (leave	blank if Statement is fo	or the partnership, firm, or	corporation and not related to any
particular client): Pha	rmaceutical Research a	ınd Manufacturers of Ame	rica (PhRMA)
Date of Report (check	one):		
April 26, 2017 ☑	July 26, 2017 □	October 25, 2017 🗆	January 31, 2018 □
I have read RSA 15, I the following Addend submitted):	RSA 15-B, RSA 664, th ums submitted with tha	ne Statement of Income and Statement (insert the n	nd Expenses described above, and umber of Addendum forms being
1 Addendum A(s).		
O Addendum B(s).		
Addendum C(s).		
complete to the best of	m that the foregoing infimy knowledge and beli	ief.	nt and each Addendum is true and
Leslie Wood			
(Print Name of lobbyis	it)		